LEGISLATIVE SERVICES AGENCY OFFICE OF FISCAL AND MANAGEMENT ANALYSIS

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FISCAL IMPACT STATEMENT

LS 6661 NOTE PREPARED: Dec 22, 2002

BILL NUMBER: SB 210 BILL AMENDED:

SUBJECT: Post-Mastectomy Coverage.

FIRST AUTHOR: Sen. Gard BILL STATUS: As Introduced

FIRST SPONSOR:

FUNDS AFFECTED: X GENERAL IMPACT: State & Local

 $\overline{\underline{X}}$ DEDICATED FEDERAL

<u>Summary of Legislation:</u> This bill requires an accident and sickness insurer and a health maintenance organization to provide notice of post-mastectomy coverage. The bill removes a provision limiting coverage for certain post-mastectomy care.

Effective Date: July 1, 2003.

Explanation of State Expenditures: This bill removes a provision limiting coverage for certain post-mastectomy care. Consequently, the bill is estimated to increase state expenditures for employee health insurance by \$0.5 M per year. The state may choose to absorb any additional costs of these provisions or to pass these costs on to employees in the form of higher deductibles, higher premiums, or by limiting other conditions covered.

Four of the state's employee health benefit providers indicate that the benefit would increase premium rates. One indicated that it would not change premiums, and one insurer did not respond with specific information. There are approximately 36,000 employees enrolled in state employee health plans. It is estimated that state employee plan cost for single coverage would increase \$4 per year and \$12 per year on average for family coverage.

Explanation of State Revenues:

<u>Explanation of Local Expenditures:</u> School corporations and local governments purchasing health benefit coverage on their own may incur increased premiums due to the mandated benefits in this bill. Local government groups enrolled in the Local Unit Government Employee (LUGE) health plan may experience

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increased rates as well. The LUGE participants have the same benefits as state employees and are part of a separate risk pool. Cost to the LUGE will be disproportionately higher than that for state employees, due in part to a smaller risk pool and adverse selection. There are currently 28 local government groups enrolled in the plan providing coverage for 868 employees.

It is unknown if local groups would absorb any additional costs resulting from this bill or pass the costs on to employees in the form of higher deductibles, higher premiums, or by limiting other conditions covered. Cost sharing of health benefit premiums varies widely by locality.

Explanation of Local Revenues:

State Agencies Affected: All.

<u>Local Agencies Affected:</u> All local units of government and local school districts that do not provide these services currently.

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